COMBINED DECLARATION AND POWER OF ATTORNEY (Original, Design, National Stage of PCT or CIP Application)

As a below named inventor, I hereby declare that:
My residence, post office address and citizenship are as stated below
next to my name, I believe I am the original, first and sole inventor
(if only one name is listed below) or an original, first and joint
inventor (if plural names are listed below) of the subject matter which
is claimed and for which a patent is sought on the invention entitled:

IMMUNOLOGICAL METHODS FOR THE TREATMENT OF GASTROINTESTINAL CANCER

the specification of which: (complete (a), (b) or (c) for type of application)

(a) (b)	Regular or Design Application is attached hereto. X was filed on February 7, 1997 as Application Serial No. 08/798,423 and was amended on
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	and amended on and amended on

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I hereby state that I have reviewed and understand the contents of
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by any amendment referred to above.

I acknowledge the duty to disclose to the United States Patent and Trademark Office all information known to me to be material to patentability as defined in Title 37, Code of Federal Regulations § 1.56.

I hereby claim foreign priority benefits under Title 35, United States Code, §119 of any foreign application(s) for patent or inventor's certificate listed below and have also identified below any foreign application for patent or inventor's certificate having a filing date before that of the application on which priority is

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Pow r of Attorney

As a named inventor, I hereby appoint Edward V. Filardi, Reg. No. 25,757; Nels Lippert, Reg. No. 25,888; Robert B. Smith, Reg. No. 28,538; David Bender, Reg. No. 35,445; Dimitrios Drivas, Reg. No. 32,218; Cecilia O'Brien Lofters, Reg. No. 33,434, Richard J. Sterner, Reg. No. 35,372; John Scheibeler, Reg. No. 35,346, Hans-Peter Hoffmann, Reg. No. 37,352, Scott T. Weingartner, Reg. No. 37,756 and Leslie Morioka, Reg. No. 40,304 the firm of WHITE & CASE, with offices at 1155 Avenue of the Americas, New York, New York 10036, as attorneys to prosecute this application and therewith.

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DIRECT TELEPHONE CALLS TO: Dimitrios T. Drivas, Esq. WHITE & CASE

(212) 819-8286

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

FULL NAME OF SOLE			
OR FIRST INVENTOR	Last Name	First Name	Middle Name
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A CTITATION HONOLULI	- HAWATT	USA	•
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				CADI	ORNIA	9	5616
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JOINT INVENTOR, IF ANY	WATSON	First Name	Middle Name
	#ATBON	SUSAN	A.
& CITIZENSHIP NOTTINGHAM	ate or Foreign C	ountry Country	of Citizenshi
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ADDRESS #5 SEATOLLA CLOSE,	EDWALTON, NOTT	<u>INGHAM, UNITED F</u>	INGDOM NG2 6R
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Power of Attorney

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FULL NAME OF SOLE OR FIRST INVENTOR	Last Name GEVAS	First Name	Middle Name
RESIDENCE City & CITIZENSHIP HONOLULU	State or Foreign Co		of Citizenship
POST OFFICE Post Offi ADDRESS 487-A Portl	ce Address City	State or Countr Hawaii	

Date

FULL NAME OF SECOND JOINT INVENTOR, IF ANY	Last Name KARR	First Name STEPHEN	Middle Name
& CITIZENSHIP DAVIS, CE	ate or Foreign ALIFORNIA	Country Country	of Citizenship
POST OFFICE Post Office ADDRESS 2265 MALSEY CIRC	Address City LE, DAVIS	State or Counti	ry Zip Code 95616
<u>Dime 3 1997</u> Date	5 Aghan	Man	
	Signatyre of	Inventor	

FULL NAME OF TO JOINT INVENTOR	R, IF ANY	Last Name GRIMES	מתבסט		Middle N	ame
RESIDENCE (DAVIS	CALIF		Country USA	of Citizer	nship USA
	Post Office Ad 551 RUTGERS DR			or Count		Code

3 June 1997

Signature of Inventor

FULL NAME OF FOURTH JOINT INVENTOR, IF ANY	Last Name MICHAELI	First DOV	Name	Midd	le Name
& CITIZENSHIP LARKSPUR,		-	Country USA	of C	itizenship
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FULL NAME OF FIFTH	Last Name	First Name	Widdle V
JOINT INVENTOR, IF ANY	WATSON		Middle Name
	te or Foreign (SUSAN Country Countr	y of Citizenship
POST OFFICE Post Office Address #5 SEATOLLA CLOSE,	ddress City	State or Coun	try Zin Codo
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EARLIEST FOREIGN APPLICATION(S), IF ANY FILED WITHIN 12	VALUE :
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Country Appl. No. Date of Filing Date of Issue	
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	() Yes () No
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60/011,411 02/08/96 (Application Number) (Filing Date)	
(Application Number) (Filing Date)	
Continuation-in-Part (complete this part only if this is a continuation-in-part I hereby claim the benefit under Title 35, United States of any United States application(s) listed below and, instructions the prior United States application in the manner proved in the prior United States application in the manner proved paragraph of Title 35, United States Code § 112, I have to disclose all information known to me to be materially as defined in Title 37, Code of Federal Regulation of the prior applicational or PCT International filing date of this application.	es Code, § 120 ofar as the is not disclosed ided by the acknowledge the al to ulations, § 1.56
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FULL NAME OF SOLE		<u> </u>	
OB FIRST TITLES	Last Name	First Name	Middle Name
OR FIRST INVENTOR	GEVAS	PHILIP	Middle Name
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FULL NAME OF FIFTH	Y 4 32	_	
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